POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.N.		4-28-0
O.I.P.E. CLASSIFIER		40	5/4/00
FORMALITY REVIEW		69652	7-17-00
RESPONSE F RMALITY REVIEW			10/13/00

INDEX OF CLAIMS

✓	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
–	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim (Final / Original)	Date					Claim (Final / Original)	Date	Claim (Final / Original)	Date
1 / 1	÷	✓	✓	=	✓	51		101	
/ 2						52		102	
2 / 3		✓	÷	✓		53		103	
3 / 4		✓	–			54		104	
4 / 5		✓	÷			55		105	
5 / 6		✓	=			56		106	
6 / 7		✓	=	✓		57		107	
9 / 8		✓	=	✓		58		108	
/ 9		✓				59		109	
/ 10	N					60		110	
/ 11						61		111	
/ 12						62		112	
/ 13						63		113	
/ 14						64		114	
/ 15						65		115	
/ 16						66		116	
/ 17						67		117	
/ 18		✓	=	✓		68		118	
/ 19						69		119	
/ 20						70		120	
/ 21						71		121	
/ 22						72		122	
/ 23						73		123	
/ 24						74		124	
/ 25						75		125	
/ 26						76		126	
/ 27						77		127	
/ 28						78		128	
/ 29						79		129	
/ 30						80		130	
/ 31						81		131	
/ 32						82		132	
/ 33						83		133	
/ 34						84		134	
/ 35						85		135	
/ 36						86		136	
/ 37						87		137	
/ 38						88		138	
/ 39						89		139	
/ 40						90		140	
/ 41						91		141	
/ 42						92		142	
/ 43						93		143	
/ 44						94		144	
/ 45						95		145	
/ 46						96		146	
/ 47						97		147	
/ 48						98		148	
/ 49						99		149	
/ 50						100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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